PTO/SB/05	(08-00)	(modified)
	,,	(···········

Approved for use through 9/30/2001, OMB 0651-0032

•		

## NEW UTILITY PATENT APPLICATION TRANSMITTAL

Fatent and Trademark Offi	CE. U.S. DEPARTMENT OF COMMERCE
Attorney Docket Number	61133.07382
First Named Inventor	Christopher J. Burt
Title	Proactive Support of a Healthcare Information System
Express Mail Label No.	EV222422674110

TRANSMITTAL (only for new nonprovisional applications under	Title		Proactive Su		Healthcare
37 CFR 1.53(b))	Expre	opress Mail Label No. EV333133674 US			
APPLICATION ELEMENTS		ACCOMPANY			PARTS
APPLICATION ELEMENTS  1.  Fee Transmittal Form (in duplicate) 2.  Applicant claims small entity status.     See 37 CFR 1.27  3.  Specification		8. Certified Copy is claim.  9. Power of Atto 10. 37 CFR 3.73(I	rapers (cover s y of Priority Do ned) rney or Author b) Statement mendment isclosure State opies of IDS Ci n Request und B)(i). Applican isB/35 or its equ	ement & PT itation(s) ler 35 U.S. t must atta	cument(s)) (if foreign predicty Agent S: 0.282 10,000 10,0
Executed (original or copy)  b. Copy from a prior application (37 CFR 1.63(d))  (for continuation/divisional with Box 18 completed)  i. DELETION OF INVENTOR(S)  Signed statement attached deleting inventor(s)  named in the prior application, see 37 CFR  1.63(d)(2) and 1.33(b).  6. Application Data Sheet. See 37 CFR 1.76			p Patent App ssioner for Pa		
Alexandria, VA 22313-1450  18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment or in an Application Data Sheet under 37 CFR 1.76:  Continuation Divisional Continuation-in-part (CIP) of prior application No:/  Prior application information: Examiner: Group/Art Unit:  For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
		NCE ADDRESS	photon parts.		
Name (Print/Type) Qin Shi		Registration No.	(Attorney/Agent,	) 5	2,220
Signature	-		Date	11/20/0	3

61133/07382/DOCS/1392995.1

	7:4	
FFF	<b>TRANSMITT</b>	Δi
<b>!</b>	IIIAII	<b></b>
•	for FY 2004	

Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 1,130

Complete if Known				
Application Number	Not yet known			
Filing Date	November 20, 2003			
First Named Inventor	Christopher J. Burt			
Examiner Name	Not yet known			
Art Unit	Not yet known			
Attorney Docket No.	61133.07382	-		

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
□ Check □ Credit Card □ Money Order □ Other □ None □ Deposit Account:	3. ADDITION	IAL FEES		
Deposit Account Number 19-2555	Large Entity	Small Entity	Fee Description	Fee Paid
Deposit Account Name Fenwick & West LLP	Fee Fee Code (\$)	Fee Fee Code (\$)		
The Commissioner is authorized to: (check all that apply)	1051 130	2051 65	Surcharge - late filing fee or oath	
Charge fee(s) indicated below 🛛 Credit any overpayments	1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
Charge all required fee(s) or any underpayment of fee(s) due	1053 130	1053 130	Non-English specification	
under 37 CFR §1.16 or §1.17 during the pendency of this application	1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
Charge fee(s) indicated below, except for the filing fee	1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
	1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
to the above-identified deposit account.			•	
FEE CALCULATION	1251 110	2251 55	Extension for reply within first month	
1. BASIC FILING FEE	1252 420	2252 210	Extension for reply within second month	
Large Entity Small Entity	1253 950	2253 475	Extension for reply within third month	
Fee Fee Fee Fee Paid	1254 1,480	2254 740	Extension for reply within fourth month	
Code (\$) Code (\$)	1255 2,010	2255 1,005	Extension for reply within fifth month	
1001 770 2001 385 Utility filing fee 770	1401 330	2401 165	Notice of Appeal	
1002 340 2002 170 Design filing fee 1003 530 2003 265 Plant filing fee	1402 330 1403 290	2402 165 2403 145	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403 290	1451 1,510	Request for oral hearing  Petition to institute a public use proceeding	<del></del>
1005 160 2005 80 Provisional filing fee	1452 110	2452 55	Petition to revive - unavoidable	<del></del>
SUBTOTAL (1) (\$) 770				
· · · · · · · · · · · · · · · · · · ·	1453 1,330	2453 665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE  Extra Claims Fee from Fee Paid  Fee Paid	1501 1,330	2501 665	Utility issue fee (or reissue)	
Delow Delow	1502 480	2502 240	Design issue fee	
Independent 40 20 20 110.00 2 500	1503 640	2503 320	Plant issue fee	
Claims 2 3 2 4	1460 130	1460 130	Petitions to the Commissioner	
Multiple Dependent =	1807 50	1807 50	Processing fee under 37 CFR 1.17(g)	
Large Entity Small Entity	1806 180	1806 180	Submission of Information Disclosure Stmt	
Fee Fee Code (\$) Fee Description	8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1201 86 2201 43 Independent claims in excess of 3	1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1203 290 2203 145 Multiple dependent claim, if not paid	1801 770	2801 385	Request for Continued Examination (RCE)	
1204 86 2204 43 **Reissue independent claims over original patent	1802 900	1802 900	Request for expedited examination of a design application	
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent	Other fee (speci	ify)		
	i		<del></del>	
SUBTOTAL (2) (\$) 1,130	i		SUBTOTAL (3) (\$) -0-	
"or number previously paid, if greater; For Reissues, see above	*Reduced by Bas	sic Filing Fee Paid		

SUBMITTED BY					Complete (if applicable)		
Name (Print/Type)	Qin Shi	Registration No. (Attorney/Agent)			Telephone (650) 335-7127		
Signature	1/2			Date	11/20/03		